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20583 7590 02/04/2010

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(Depositor's name)

(Signature)

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/724,538	11/28/2000	Daniel D. Shoemaker	9301-123	7044

TITLE OF INVENTION: COMPOSITIONS AND METHODS FOR EXON PROFILING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	05/04/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
LU, FRANK WEI MIN	1634	435-287200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Christensen O'Connor Johnson Kindness PLLC
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	2 _____	1 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Merck Sharp & Dohme Corp.

Rahway, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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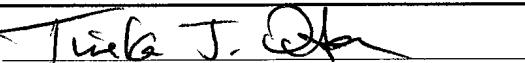
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1740 (enclose an extra copy of this form).

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Authorized Signature



Date June 29, 2010

Typed or printed name Tineka J. Quinton

Registration No. 53,496

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